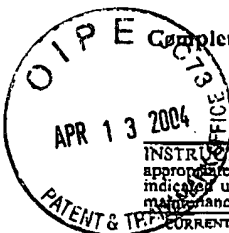


## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
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P.O. Box 1450  
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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23859 7590 03/09/2004

Corning Incorporated  
SP-TI-03-1  
Corning, NY 14830

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Gregory V. Bean

(Depositor's name)

(Signature)

(Date)

13 Apr 2004

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/868,874	04/15/2002	Steffen Schmid	08256.0148	1265

TITLE OF INVENTION: Acousto-Optic Add/Drop Multiplexer with Retro-Reflection and Wavelength Selective Optical Cross-Connect

Acousto-Optic Add/Drop Multiplexer with Retro-Reflection and Wavelength Selective Optical Cross-Connect

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	06/09/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PETKOVSEK, DANIEL J	2874	385-007000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gregory V. Bean

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Corning Incorporated

Corning, New York

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

13 April 2004

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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

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PAGE 1/1 \* RCVD AT 4/13/2004 12:08:41 PM [Eastern Daylight Time] \* SVR:USPTO-EFXXRF-2/2 \* DNIS:7464000 \* CSID:6079742407 \* DURATION (mm:ss):01-06

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